



SOUTHERN CALIFORNIA
EDISON®
An EDISON INTERNATIONAL® Company

Property Owner Authorization

Energy Savings
.....
Assistance Program™

Section 1: Property Owner Information

Legal Property

Owner Name:

Property Owner Mailing Address	City	State	Zip Code
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Contact

Phone Number:

Contact

Fax Number:

Section 2: Site Information *(List property or properties authorized to receive ESA Program Services)-Attach additional properties to this document on the Property Owner Authorization Supplemental Site Information form*

Installation Address	City	State	Zip Code
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Total Unit(s) in Building	# of Unit(s) Authorized	Authorized Unit(s)
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Installation Address	City	State	Zip Code
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Total Unit(s) in Building	# of Unit(s) Authorized	Authorized Unit(s)
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Installation Address	City	State	Zip Code
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Total Unit(s) in Building	# of Unit(s) Authorized	Authorized Unit(s)
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Section 3: Additional Information

Section 4: Signature

I certify I have read, understand, and agree to the terms and conditions contained in the Authorization on the back of this document. I certify I am the legal owner of the Property(ies) or the legal owner's authorized representative. I will provide proof of ownership upon request.

Legal Property Owner or Representative Printed Name	Legal Property Owner or Representative Signature	Date
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PRINTED NAME

SIGNATURE

DATE

Office Use Only:

Company Name:	Company Phone Number:
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Company Address:	Company Fax Number:
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Company Representative Printed Name:	Company Representative Signature:	Date:
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White - ESA Program

Yellow - Owner/Authorized Representative

Pink - Contractor

Revision 140527

PROPERTY OWNER AUTHORIZATION

I certify that I am the legal owner, or the legal owner's authorized representative, for the property(ies) ("Property") listed in Section 2, and I hereby expressly grant permission to [PG&E, SoCalGas, SCE, and/or SDG&E] ("IOU") and its contractor(s) ("Contractor") to access Property to provide all feasible program measures, improvements and services ("Measures"), including any outlet grounding or natural gas appliance testing, if necessary, as determined by IOU and Contractor (the "Work") and as allowed by the Energy Savings Assistance Program ("Program"). If the Property is selected for inspection, I further grant permission to IOU and Contractor to access Property to perform inspection services.

I acknowledge and agree that the IOU makes no representations as to the safety, reliability and/or efficiency of the Measures. The IOU makes no warranty, whether express or implied, including warranty of merchantability or fitness for any particular purpose, use or application of the Measures.

I acknowledge and agree that IOU shall not be liable for any damages or losses arising out of any act or omission of Contractor or any subcontractor of Contractor in performing the Work, and I hereby waive any and all claims against the IOU that may arise in connection with the Work. I agree to hold the Contractor solely responsible for the performance of the Work and for any and all claims, losses, liabilities, damages and expenses (including attorneys' fees and costs) that may incur as a result of Work. Furthermore, I shall defend, indemnify, and hold harmless IOU and its officers and employees against any and all causes of action, liability, damages, demands or costs, for injury to or death of any and all persons whatsoever, and for any and all damage to property, in any manner arising from, or in connection with, the performance of the Work hereunder, except for those damages caused solely by the negligence or willful misconduct of IOU. I acknowledge and agree that the IOU shall not be liable if the current or future tenant removes any or all of the installed Measures, including appliances, without my prior consent.

I acknowledge and agree that the IOU may modify or discontinue the Program at any time at its sole discretion, without prior notice, or by order of the California Public Utilities Commission (CPUC). The Program is funded by California ratepayers and administered by the IOU under the auspices of the CPUC, and is subject to the availability of funds.

I understand all Measures provided will be at no cost to my tenants or me except a non-refundable co-payment to Contractor may be required for the following Measures:

- Central air conditioner and/or heat pump
- Energy Star Refrigerator
- Energy Star Room Air Conditioner

I acknowledge and agree that in the event that I do not provide the non-refundable co-payment to Contractor, the approved Measures will not be installed. I understand that that the non-refundable co-payment is made directly to Contractor, and acknowledge that IOU is **not** in receipt of any monies related to the co-payment.

The following is a partial list of Measures that **may** be installed at the Property; properties are evaluated individually by Contractor and IOU who will make the final installation recommendation in accordance with Program policies and procedures as established by the CPUC.

Attic Insulation	Hard-wired Compact Fluorescent Fixtures	Smart Power Strip
Attic Access Weatherstripping	Low-Flow Showerhead	Exterior Door Replacement
Door Weatherstripping	Switch & Outlet Gaskets	Broken Glass Replacement
Faucet Aerators	Thermostatic Shower Valve	Compact Fluorescent Lamps

For the Contractor to install certain Measures, including but not limited to room air conditioner replacement, evaporative cooler installation, and refrigerator replacement, a properly grounded electrical outlet must exist in the Property. I hereby authorize the Contractor to perform, at no cost to the tenant or me, the work required, if any, to ground an electrical outlet in the Property.

I authorize the performance of natural gas appliance testing (NGAT) on all applicable natural gas appliances. I understand NGAT will be conducted on all applicable natural gas appliances to detect potential carbon monoxide problems. Should said problems be detected, I authorize Program representatives to shut off the appliance(s) and understand I, as the owner of the Property, will be solely responsible for any gas appliance repairs or replacements necessary to correct the situation.

I acknowledge and agree that IOU has not authorized any services, improvements, installations or equipment other than the Measures, outlet grounding and NGAT, and I understand that IOU assumes no liability for such services, improvements, installations or equipment.

By signing this Authorization, I, the owner of the Property or its authorized representative, certify that this Authorization contains the entire agreement between the parties and no other agreement, statement, or promise made by any party, which is not contained in this Authorization, shall be binding or valid. I hereby authorize IOU and Contractor to access my information including, without limitation thereto, the addresses and other information required for Contractor to access my Property to provide all feasible Program measures, improvements, and services to eligible tenants in any authorized units. I understand that IOU and Contractor will treat my information as confidential.